



## Water Compliance Inspection Report

### Section A: National Data Coding (i.e., PCS)

Transaction Code NPDES yr / mo / dy Inspection Type Inspector FacType  
1 [N] 2 [ ] 3 [T][N][0][0][6][4][6][7][0] 11 12 [1][3][0][9][2][7] 17 18 [C] 19 [S] 20 [1]  
Remarks

Inspection Work Days Facility Self-Monitoring Evaluation BI QA -----Reserved-----  
Rating  
67 [ ] [ ] 69 70 [3] 71 [N] 72 [N] 73 [ ] 74 [ ] 75 [ ] [ ] [ ] [ ] [ ]

### Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)  Chapel Hill STP Highway 99 Chapel Hill, TN 37034	Entry Time / Date  11:00 - 9/27/13	Permit Effective Date  6/1/2013
	Exit Time / Date  12:15 - 9/27/13	Permit Expiration Date  5/30/2018
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)  Donnie Groves Superintendent   931-364-7632 Jonathan Helmick WWTP Operator   931-364-2434		Other Facility Data (e.g., SIC NAICS, and other descriptive information)
Name, Address of Responsible Official / Title / Phone and Fax Number  The Honorable Carl Cooper, Mayor   931-364-7632 Town of Chapel Hill P.O. Box 157 Chapel Hill, TN 37034  Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

### Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input checked="" type="checkbox"/> Permit	<input checked="" type="checkbox"/> Self-monitoring Program	<input type="checkbox"/> Pretreatment Program	<input type="checkbox"/> MS4
<input checked="" type="checkbox"/> Records / Reports	<input type="checkbox"/> Compliance Schedule	<input type="checkbox"/> Pollution Prevention	
<input checked="" type="checkbox"/> Facility Site Review	<input checked="" type="checkbox"/> Laboratory	<input type="checkbox"/> Storm Water	
<input checked="" type="checkbox"/> Effluent / Receiving Waters	<input checked="" type="checkbox"/> Operation & Maintenance	<input type="checkbox"/> Combined Sewer Overflow	
<input checked="" type="checkbox"/> Flow Measurement	<input type="checkbox"/> Sludge Handling / Disposal	<input checked="" type="checkbox"/> Sanitary Sewer Overflow	

### Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description
[ ] [ ] [ ] [ ] [ ]	See attached letter.
[ ] [ ] [ ] [ ] [ ]	
[ ] [ ] [ ] [ ] [ ]	
[ ] [ ] [ ] [ ] [ ]	

Name (s) and Signature(s) of Inspector(s) 	Agency / Office / Phone and Fax Numbers Tennessee Division of Water Pollution Control Columbia Environmental Field Office 931 490 3940 / 931 380-3397 (FAX)	Date 10/23/13
Signature of Management Q A Reviewer Ryan Owens EFOM 	Agency / Office / Phone and Fax Numbers Tennessee Division of Water Pollution Control Columbia Environmental Field Office 931 490 3941 / 931 380-3397 (FAX)	Date 10/25/2013